

# EXHIBIT C

TAXABLE YEAR  
**2018****California Nonresident or Part-Year  
Resident Income Tax Return Long Form**

839041 12-28-18

FORM

**540NR**

APE

ATTACH FEDERAL RETURN

18 PBA 512200

ONIKA

MARAJ

A  
R  
RPC/O 21731 VENTURA BLVD 300  
WOODLAND HILLS CA 91364

If your California filing status is different from your federal filing status, check the box here

Filing Status	1	<input checked="" type="checkbox"/> Single	4	<input type="checkbox"/> Head of household (with qualifying person). See instructions.
	2	<input type="checkbox"/> Married/RDP filing jointly. See inst.	5	<input type="checkbox"/> Qualifying widow(er). Enter year spouse/RDP died. <input type="text"/>
	See instructions. <input type="text"/>			
3	<input type="checkbox"/> Married/RDP filing separately. Enter spouse's/RDP's SSN or ITIN above and full name here <input type="text"/>			
6	If someone can claim you (or your spouse/RDP) as a dependent, check the box here. See inst. .... • 6 <input type="text"/>			

► For line 7, line 8, line 9, and line 10: Multiply the amount you enter in the box by the pre-printed dollar amount for that line. **Whole dollars only**7 **Personal:** If you checked box 1, 3, or 4 above, enter 1 in the box. If you checked box 2 or 5, enter 2. If you checked the box on line 6, see instructions. • 7 X \$118 = • \$ 8 **Blind:** If you (or your spouse/RDP) are visually impaired, enter 1; if both are visually impaired, enter 2• 8  X \$118 = • \$ 9 **Senior:** If you (or your spouse/RDP) are 65 or older, enter 1; if both are 65 or older, enter 2• 9  X \$118 = • \$ 10 **Dependents:** Do not include yourself or your spouse/RDP.

Exemptions	Dependent 1			Dependent 2			Dependent 3		
	First Name •	<input type="text"/>	•	<input type="text"/>	•	<input type="text"/>	•	<input type="text"/>	
	Last Name •	<input type="text"/>	•	<input type="text"/>	•	<input type="text"/>	•	<input type="text"/>	
	SSN •	<input type="text"/>	•	<input type="text"/>	•	<input type="text"/>	•	<input type="text"/>	
	Dependent's relationship to you •	<input type="text"/>	•	<input type="text"/>	•	<input type="text"/>	•	<input type="text"/>	

Total dependent exemptions ..... • 10  X \$367 = • \$ 

022

3131184

Long Form 540NR 2018 Side 1

TAXABLE YEAR

FORM

**2019****California Resident Income Tax Return****540**

APE

ATTACH FEDERAL RETURN

19 PBA 711510

ONIKA MARAJ  
KENNETH N PETTY

A  
R  
RP

C/O 21731 VENTURA BLVD 300  
WOODLAND HILLS CA 91364

If your California filing status is different from your federal filing status, check the box here

Filing Status

1

☐

Single

4

☐

Head of household (with qualifying person). See instructions.

2

☒

Married/RDP filing jointly. See inst.

5

☐

Qualifying widow(er). Enter year spouse/RDP died

See instructions

3

☐

Married/RDP filing separately. Enter spouse's/RDP's SSN or ITIN above and full name here

6

If someone can claim you (or your spouse/RDP) as a dependent, check the box here. See inst.

6

► For line 7, line 8, line 9, and line 10: Multiply the number you enter in the box by the pre-printed dollar amount for that line. **Whole dollars only**

**7 Personal:** If you checked box 1, 3, or 4 above, enter 1 in the box. If you checked box 2 or 5, enter 2 in the box. If you checked the box on line 6, see instructions

7

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X \$122 =

X \$122 =

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X \$122 =

X \$122 =

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X \$122 =

**8 Blind:** If you (or your spouse/RDP) are visually impaired, enter 1; if both are visually impaired, enter 2

8

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X \$122 =

X \$122 =

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**9 Senior:** If you (or your spouse/RDP) are 65 or older, enter 1; if both are 65 or older, enter 2

9

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X \$122 =

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X \$122 =

X \$122 =

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**10 Dependents: Do not include yourself or your spouse/RDP.**

Dependent 1

Dependent 2

Dependent 3

First Name

X

X

X

Last Name

X

X

X

SSN

X

X

X

Dependent's relationship to you

X

X

X

Total dependent exemptions

10

X \$378 =

X \$378 =

X \$378 =

X \$378 =

X \$378 =

X \$378 =

X \$378 =

X \$378 =

X \$378 =

X \$378 =

X \$378 =

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TAXABLE YEAR

FORM

**2020****California Resident Income Tax Return****540**

APE

ATTACH FEDERAL RETURN

20 PBA 711510

ONIKA T MARAJ  
KENNETH N PETTY

A  
R  
RP

C/O 21731 VENTURA BLVD 300  
WOODLAND HILLS CA 91364

Enter your county at time of filing (see instructions)

☒ **LOS ANGELES**

If your address above is the same as your principal/physical residence address at the time of filing, check this box ☒

If not, enter below your principal/physical residence address at the time of filing.

Street address (number and street) (If foreign address, see instructions.) Apt. no/ste. no.

☒ [REDACTED] ☒ [REDACTED]

City State ZIP code

☒ [REDACTED] ☒ [REDACTED] ☒ [REDACTED]

If your California filing status is different from your federal filing status, check the box here

**Filing Status**

1 ☐ Single 4 ☐ Head of household (with qualifying person). See instructions.

2 ☒ Married/RDP filing jointly. See inst. 5 ☐ Qualifying widow(er). Enter year spouse/RDP died. [REDACTED]

See instructions. [REDACTED]

3 ☐ Married/RDP filing separately. Enter spouse's/RDP's SSN or ITIN above and full name here. [REDACTED]

6 If someone can claim you (or your spouse/RDP) as a dependent, check the box here. See inst. [REDACTED] • 6

► For line 7, line 8, line 9, and line 10: Multiply the number you enter in the box by the pre-printed dollar amount for that line. **Whole dollars only**

**Exemptions**

7 **Personal:** If you checked box 1, 3, or 4 above, enter 1 in the box. If you checked box 2 or 5, enter 2 in the box. If you checked the box on line 6, see instructions. ☒ 7 [REDACTED] X \$124 = ☒ \$ [REDACTED]

8 **Blind:** If you (or your spouse/RDP) are visually impaired, enter 1; if both are visually impaired, enter 2 ☒ 8 [REDACTED] X \$124 = ☒ \$ [REDACTED]

9 **Senior:** If you (or your spouse/RDP) are 65 or older, enter 1; if both are 65 or older, enter 2 ☒ 9 [REDACTED] X \$124 = ☒ \$ [REDACTED]